

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 8:17-cv-00083

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for (name of individual and title, if any) Scott A. Lyons
 was received by me on (date) March 22, 2017

☐ I personally served the summons on the individual at (place) _____
 _____ on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
 designated by law to accept service of process on behalf of (name of organization) _____
 _____ on (date) _____; or

☐ I returned the summons unexecuted because _____; or

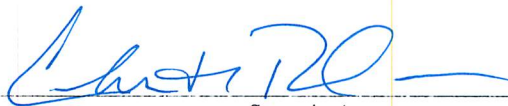
☒ Other (specify):

Summons was served on Defendant Scott A. Lyons by United States certified mail, postage of \$6.98 prepaid, on
 March 27, 2017, as reflected on the attached certified mail signature card.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: March 30, 2017



Server's signature

Christopher J. Tjaden, Attorney

Printed name and title

Gross & Welch, P.C., L.L.O.
 2120 South 72nd Street
 1500 Omaha Tower
 Omaha, NE 68124

Server's address

Additional information regarding attempted service, etc:

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- **Print your name** and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Scott A. Lyons
Papillion Police Department
1000 East First Street
Papillion, NE 68046-7611



9590 9402 2312 6225 3136 46

2. Article Number (Transfer from service label)

7015 1520 0003 3965 2441

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

A. Hanson

☐ Agent☐ Addressee

B. Received by (Printed Name)

A. Hanson

C. Date of Delivery

3/28/17

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery